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58965

State of Nebraska  
Investigator's Motor Vehicle Accident Report

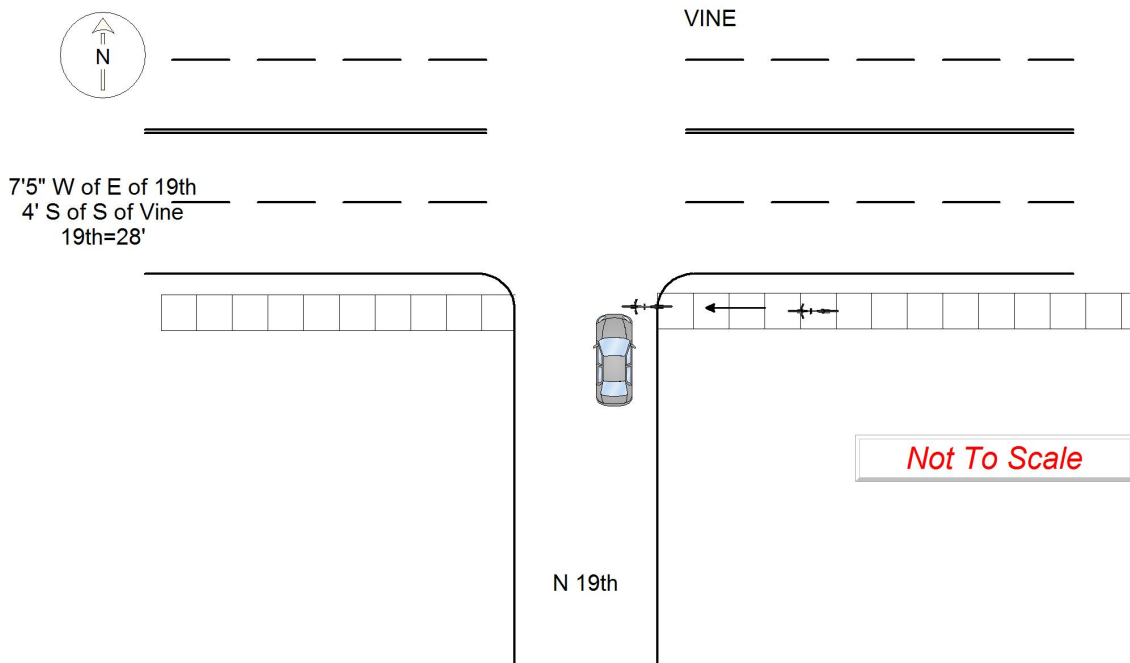
Sheet 1 of 2

1	Total Number of Vehicles	Local No./ District 26	Agency Case No. B5-081151	HIT & RUN? <input type="radio"/> YES <input checked="" type="radio"/> NO	INVESTIGATION MADE AT SCENE? <input checked="" type="radio"/> YES <input type="radio"/> NO	L 1
A/1 01	DATE OF ACCIDENT	M M / D D / Y Y Y Y 09/03/2015		(In Military Time) TIME OF ACCIDENT 1238		STATE USE ONLY  09/03/2015
A/2	PLACE OF ACCIDENT	COUNTY Lancaster	CITY Lincoln	POLICE NOTIFIED 1238	PRIVATE PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	
B 90	ROAD ON WHICH ACCIDENT OCCURRED	STREET/ HIGHWAY NO. 19th and Vine St			ONE-WAY STREET? <input type="radio"/> YES <input checked="" type="radio"/> NO	
C 1	DISTANCE FROM MILEPOST	FEET	N S E W	OF MILEPOST	HIGHWAY NO.	
D 1	IF AT INTERSECTION NAME OF INTERSECTING ROADWAY N 19th			IF NOT AT INTERSECTION OF NEAREST STREET, BRIDGE, RAILROAD CROSSING		
V1/M 01	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN					
V2/M	MILES	N S E W	AND MILES	N S E W	OF NEAREST CITY OR TOWN	
E 2	R. WORK ZONE CODES R1 R2 R3 R4 1	S. PEDESTRIAN CLASSIFICATION CODES S1 S2 S3 S4 S5-a S5-b S6-a S6-b 02 2 1 1 01		DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO		
VEHICLE NO. 1						
F 1	DRIVER LICENSE NO.	H13389354			STATE (Of License) NE	SEX <input type="radio"/> FEMALE <input checked="" type="radio"/> MALE
V1/N 5	DRIVER VICTORIANO D AQUINO	PHONE 402-212-8336			LOCAL NO.	
V2/N	DRIVER ADDRESS 6721 ASPEN ST, LA VISTA, NE 68128	CITY, STATE, ZIP			DATE OF BIRTH (MM / DD / YYYY) 02/21/1994	V1/1 15
G 2	OWNER VICTORIANO D AQUINO / VICTORIANO AQUINO JR	PHONE 402-212-8336			LOCAL NO.	
H 5	OWNER ADDRESS 6721 ASPEN ST, LA VISTA, NE 68128	CITY, STATE, ZIP			CITATION <input type="radio"/> PENDING <input checked="" type="radio"/> YES <input type="radio"/> NO	CITATION NO.
V1/O 1	LICENSE PLATE PA NO. RRT539	YEAR (Plate Expires) 2016			STATE (Of Plate) NE	V1/3
V2/O	VEHICLE 2012	MAKE Ford	MODEL FUSION	BODY STYLE 4 door Sedan	COLOR blue	ESTIMATED DAMAGE <input type="radio"/> TOALED \$ 500
I 1	VEHICLE ID NO. (VIN) 3FAHP0HA2CR366841	INSURANCE COMPANY AMERICAN FAMILY MUTUAL			V1/4	
J 01	TOWED TO	TOWED BY			POLICY NO. 1925-09-88-FPPA-NE	V1/5 15
VEHICLE NO. 2						
K 03	DRIVER LICENSE NO.				STATE (Of License)	SEX <input type="radio"/> FEMALE <input type="radio"/> MALE
V1/P 1	DRIVER	PHONE			LOCAL NO.	
V2/P	DRIVER ADDRESS	CITY, STATE, ZIP			DATE OF BIRTH (MM / DD / YYYY)	V2/1
J 01	OWNER	PHONE			LOCAL NO.	
V1/Q 4	OWNER ADDRESS	CITY, STATE, ZIP			CITATION <input type="radio"/> PENDING <input type="radio"/> YES <input type="radio"/> NO	CITATION NO.
V2/Q	LICENSE PLATE NO.	YEAR (Plate Expires)			STATE (Of Plate)	V2/2
K 03	VEHICLE	YEAR	MAKE	MODEL	BODY STYLE	COLOR
	VEHICLE ID NO. (VIN)	INSURANCE COMPANY			ESTIMATED DAMAGE <input type="radio"/> TOALED \$	
	TOWED TO	TOWED BY			POLICY NO.	
Complete this section for all injured persons (Complete a continuation report, if more than three were injured)						
VEH. # 0	NAME Thomas Dalton Lincoln, NE	ADDRESS			DATE OF BIRTH (MM / DD / YYYY) 04/21/1989	1 Seat Position 19
	LOCAL NO. 402-890-8545	MEDICAL FACILITY NAME BryanLGH Medical Center West (Lincoln General)			EMS SERVICE NAME Lincoln Fire & Rescue	2 Eject 10
					3 Body Region 3	4 Injury Sev. 2
					5 Trans. 2	SEX M
VEH. #	NAME	ADDRESS				
	LOCAL NO.	MEDICAL FACILITY NAME			EMS SERVICE NAME	EMS RUN REPORT NO.
VEH. #	NAME	ADDRESS				
	LOCAL NO.	MEDICAL FACILITY NAME			EMS SERVICE NAME	EMS RUN REPORT NO.

**THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS**

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.  
**B5-081151**



**DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION**

Driver #1 said he was N bound on 19th, stopped at Vine. This is a turn only on Vine. Driver 1 said he didn't see the bicyclist W bound on the sidewalk when he was looking left to see if it was safe to proceed. Driver 1 said he moved out slightly and the bicyclist appeared right in front of him. The cyclist said he was on the sidewalk heading West along Vine approaching 19th. Cyclist said driver 1 didn't stop and struck him as he was riding through 19th. Cyclist said he was going about 10-15 mph. Witness said it looked like driver 1 stopped, but crept forward at the same time the cyclist entered the intersection while riding.

<b>PROPERTY</b>	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE																																																																		
	grn/wht Maxair Gen	Thomas Dalton	616 S. 19, Lincoln, NE	402-890-8545	\$ 200																																																																		
<b>WITNESSES</b>	NAME	ADDRESS			PHONE																																																																		
	Allen Jewitt				402-429-9221																																																																		
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INVESTIGATOR NAME (Print or Type) <b>Richard Fitch</b>		INVESTIGATOR SIGNATURE <b>Approved by Officer Richard Fitch</b>		DATE OF REPORT <b>09/03/2015</b>																																																																			
				<b>Photographs taken?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO																																																																			